FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)				Officers	
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, over the lines	type 12FE4	Office use only M5	
People's Hous	se PAC		111111			
ADDRESS (number and	street) PO B	ox 685				
(Check if addr is changed)	ess Madi			w	53701 _ 0685	
			CITY▲	STATE▲	ZIP CODE 🛦	
COMMITTEE'S E-MAI	IL ADDRESS ilders@yahoo.co	m			1	
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COMMITTEE'S WEB	PAGE ADDRESS (U	RL)				
COMMITTEE'S FAX N	NUMBER					
با لبنا	سسا ل	_				
2. DATE 0 3		2 0 0 6 °				
3. FEC IDENTIFICA	TION NUMBER	(C C00410092			
4. IS THIS STATEM	MENT X NEW	(N) OR	AMENDE	D (A)		
I certify that I have exami	ined this Statement and	to the best of my know	vledge and belief it is true,	correct and complete		
Type or Print Name of	Treasurer	lichael Childers				
Signature of Treasurer	. Electronically Filed	d by Michael Cl	nilders	Date	03 / D D / Y 2006	
NOTE: Submission of fa			subject the person signing		penalties of 2 U.S.C. S437g. DAYS	
Office Use Only			For further info Federal Election Toll Free 800-42	24-9530	FEC FORM 1 (Revised 02/2003)	